EXPRESS MAIL CERTIFICATE

Date 0/11/01 Label No. 276771901903

I hereby certify that, on the date indicated above, this paper or fee was deposited with the U.S. Postal Service & that it was addressed for delivery to the Assistant Commissioner for Patents, Washington, DC 20231 by "Express May Post Office to

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PATENT TRADEMARK OFFICE

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Docket No: 6920/0J924

DARBY & DARBY P.C.

805 Third Avenue New York, New York 10022 212-527-7700

Box PATENT APPLICATION
Assistant Commissioner for Patents
Washington, DC 20231

Sir:

Enclosed please find an application for United States patent as identified below:

<u>Inventor/s</u> (name <u>ALL</u> inventors):

Hiroshi KOSHIBA

Title: SEMICONDUCTOR TEST APPARATUS AND CONTROL METHOD THEREFOR

including the items indicated:

- Specification and 8 claims: 2 indep.; 6 dep.; multiple dep.; including 15 page(s) of written description; 2 page(s) of claims; 1 page(s) of abstract.
- 2. [X] Drawings, 5 sheets (Figs. 1-5)
- 3. [X] Executed Declaration/Power of Attorney
 [] Unexecuted Declaration/Power of Attorney
- [X] Assignment for recording to: Ando Electric Co., Ltd.

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[X] Pursuant to 37 C.F.R. §1.215(b), please print the following assignment information on the face of the published application:

Assignee: Ando Electric Co., Ltd.

5. [X] Priority is claimed under 35 U.S.C. §119(b) of:

Country:

Japan

Number:

2000-317871

Date:

October 18, 2000

A certified copy of the prior document [X] is enclosed [] will follow [] was filed in a previous application.

6. [X] Payment in amount of \$780.00, (\$740 filing; \$40 recording) in the form of

[X] check

[] deposit account no. 04-0100

[] credit card (see attached form)

(See attached Fee Computation Sheet)

Date: October 11, 2001

Respectfully submitted,

S. Peter Ludwig

Reg. No. 25,351

Attorney for Applicant(s)

PATENT FEE COMPUTATION SHEET

	No. of Claims Presented	Extra Claims Previously Paid For	Number of Extra Claims	Rate
Basic Fee				\$740.00
Total Claims	8 - 20	- 0 = 0	x \$18.00	\$0.00
Independent Claims	2 - 3	- 0 = 0	x \$84.00	\$0.00
Multiple Depender	nt Claims	- if so, add	\$280.00	\$0.00
Surcharge for lat	te submission of fil	ling fee and/or decla	aration (\$130.00)	\$0.00
SUBTOTAL				\$740.00
[] Small Entity REDUCTION (Half of Subtotal)				\$0.00
Fee for recordation of assignment (\$40.00)				\$40.00
Charge for filing non-English language application (\$130.00)				\$0.00
TOFAL				\$780.00